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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No.	14282US02
		First Inventor	Jeyhan Karaoguz
		Title	Migration Of Stored Media Through A Media Exchange Network
		Express Mail Label No.	EV 304936308 US

<b>APPLICATION ELEMENTS</b>		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Washington, DC 22313-1450
See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings <i>(if filed)</i> -Detailed Description -Claim(s) -Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 12]	c. <input type="checkbox"/> Statements verifying identity of above copies
5. Oath or Declaration [Total Pages 4]  a. <input checked="" type="checkbox"/> Newly executed (original or copy)  b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTORS</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b) (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation       Divisional       Continuation-in-part (CIP)      of prior application No.:

Prior application information:	Examiner:	Group/Art Unit:			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
18. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number		23446	<input type="checkbox"/> Correspondence address below		
Name	Christopher Winslade				
Address	McAndrews, Held & Malloy 500 West Madison, Suite 3400				
City	Chicago	State	IL	Zip Code	60661
Country	USA	Telephone	(312) 775-8000	Fax	(312) 775-8100

Name (Print/type)	Kevin E. Borg	Registration No. (Attorney/Agent)	51,486
Signature	<i>K - E - B</i>		Date: 9/30/03

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U.S. PTO

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
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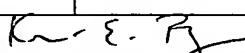
## FEE TRANSMITTAL for FY 2003

Patent Fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$948.00)

Completeness if Known	
Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Jeyhan Karaoguz
Examiner Name	Unassigned
Group Art Unit	Unassigned
Attorney Docket No.	14282US02

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																																																																																																												
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Deposit Account Number</td> <td style="width: 150px;">13-0017</td> </tr> <tr> <td style="text-align: center;">Deposit Account Name</td> <td>McAndrews, Held &amp; Malloy</td> </tr> </table> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  <input type="checkbox"/> Applicant claims small entity status.          See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:  <input checked="" type="checkbox"/> Check   <input type="checkbox"/> Credit Card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other</p>				Deposit Account Number	13-0017	Deposit Account Name	McAndrews, Held & Malloy	<p>3. 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1204	84	2204	42	**Reissue independent claims over original patent																																																																																																																																																																																																																																												
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																												
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**or number previously paid, if greater; For Reissues, see above																																																																																																																																																																																																																																																
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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Kevin E. Borg	Registration No. (Attorney or Agent)	51,486	Telephone (312) 775-8000
Signature			Date	September 30, 2003

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